

SUDBURY URBAN DISTRICT

OR

BOROUGH of



SUDBURY,

Suffolk

IN THE ADMINISTRATIVE COUNTY OF WEST SUFFOLK.

Annual Report of the Medical Officer of Health for 1925.

I.—General Statistics.

Estimated Population	} 7008.	Number of families or separate occupiers (estimated)	...	...	1896
Area, 1925 acres.		Number of Inhabited Houses	...	...	1810
		Rateable Value	...	...	£25,154.
		Sum represented by a penny rate,	£88.		

SOCIAL CONDITION.

The occupation of the majority of the inhabitants is divided between silk weaving mat making and corset making. The factories are kept in a healthy condition and these occupations do not appear to have any adverse effect upon the health of the workers to any great extent than would be explained by the necessary confinement. These are not highly paid occupations and yet the health of the district seems to be average.

2.—Extracts from Vital Statistics of the year.

BIRTHS.	{ Legitimate	85	41	44	Birth Rate (Registrar General)	12.2	England and
	{ Illegitimate	1	1	0			Wales 18.3
DEATHS.		101	40	61	Death Rate (Registrar General)	14.2.	England and
							Wales, 12.2
	Number of women dying in or in consequence of child-birth					{ from sepsis	... 0
						{ from other causes	1
	Deaths of Infants under one year of age per 1,000 births ...					{ Legitimate	58.7
						{ England & Wales	75.
						{ Illegitimate	... 0
	Deaths from Measles (all ages)	...	...	...	0		
	„ „ Whooping Cough (all ages)	...			0		
	„ „ Diarrhoea (under 2 years of age) [†]	...			1		

POOR LAW RELIEF.

The figures of the amount of Poor Law Relief are not in my possession and were not available.

Gratuitous medical relief is extensively used. As an example of the extent may be quoted the fact that 81 patients were admitted to St. Leonard's Hospital (18 beds) from the Borough during the year. The average stay was 15.13 days.

Causes of Sickness.

The year on the whole, has been a healthy one as far as the amount of invalidity is concerned, the heavy death rate being explained by the mortality amongst the aged at the latter end of the year.

There is no special cause of sickness calling for attention except an epidemic of influenza at the beginning of the year. This was extraordinarily widespread, but the type was mild and the complications few.

Health Services.

HOSPITALS PROVIDED OR SUBSIDISED BY THE LOCAL AUTHORITY OR BY THE COUNTY COUNCIL.

- (1) *Tuberculosis.* The Bury St. Edmund's Sanatorium admits cases from the Town, and is provided by the County Council.
- (2) *Maternity Hospitals,* }
- (3) *Children's Hospitals,* } There are none available for the Town.
- (4) *Fever Hospital* situated in the Borough. Has two wards only, each holding eight beds. These are used for Scarlet Fever, Diphtheria or Erysipelas as occasion arises. An observation Ward is very desirable. Alterations are under consideration.
- (5) *Small Pox Hospital.* There is none available for the Town.
- (6) There is no Institutional Provision for unmarried mothers, illegitimate infants or homeless children.
- (7) *Ambulance Facilities.*
 - (a) For infectious cases, a horse ambulance is maintained by the Borough Council.
 - (b) For non-infectious and accident cases, a motor ambulance is maintained by the British Red Cross Society, Suffolk Branch, at Bury St. Edmunds, 16 miles away, and this can be hired. A wheeled stretcher, the property of the British Red Cross Society, is available for use. Application should be made to Mr. Phillip Adams, King Street, Sudbury, for this. For accident cases, a police stretcher is also available.

CLINICS AND TREATMENT CENTRES.

There is a Maternity and Child Welfare Centre under the West Suffolk County Council and attended by the County Medical Officer of Health.

There is also a School Clinic run by the School Medical Officers of the County.

There are no Day Nurseries, Tuberculosis or Venereal Centres in the Town.

9.—Public Health Staff.

Medical Officer of Health (part time).

One Sanitary Inspector (part time). Member Royal Sanitary Institute. The appointment is a double one. The Borough Surveyor is always appointed as Sanitary Inspector also.

There is a real need for an Assistant Sanitary Inspector.

(a) NURSING IN THE HOME.

One District Nurse is provided by the Sudbury and Ballingdon Branch of the Suffolk Nursing Association.

Local Authority gives no subsidy.

There is no home nursing provided for Infectious Diseases.

(b) MIDWIVES.

One practising in the District provided by the Sudbury and Ballingdon Branch of the Suffolk Nursing Association.

Two practising privately.

No subsidy given by Public Health Authority.

LEGISLATION IN FORCE.

There is only one byelaw in force in the Borough. This refers to the provision of flushing cisterns.

This subject of byelaws was under consideration of the Council at the end of the year.

ADOPTIVE ACTS.

Part III., Public Health Act, 1890.

Sanitary Circumstances of the Area.

WATER.

The supply is distributed from the Sudbury Corporation Waterworks, which consists of a bore hole 278 feet deep into the chalk, the water is pumped into a service reservoir of 300,000 gallons, equal to 2½ days supply.

The Pumping Plant is 55 years old, and, naturally, not as economic to run as a modern installation.

The water is of good quality, but very hard. It is subject to little risk of contamination.

The distribution is efficient in respect to a greater portion of the Borough, but there are some small areas near the reservoir and surrounding heights where the pressure is faulty.

A water tower would overcome any deficiency of this nature.

The water is laid into the greater proportion of houses and only in a few cases in the older properties do we find stand-pipes outdoors ranging from 4 to 7 houses to one tap.

The supply has been extended in an easterly direction beyond the Borough Boundary, into the the Chilton Parish, and extensions have been made to supply isolated groups of houses where the number justified the expenditure.

There are some houses so far removed that they have to depend upon their own wells, in these cases the quality of the water is good.

RIVERS AND STREAMS.

The River Stour runs through the Town and the surface water and sewerage of the town is run into it. There are a number of dykes and ditches, and one of these gave trouble during the period under review. It was discovered that some water-closets remained connected with the old sewer and caused the trouble. It is believed that these have been discovered and the trouble remedied.

DRAINAGE AND SEWERAGE.

The sewerage of the town has been under constant supervision. Work has been done upon the sewerage beds and the outfall is fair. Further work upon these beds will be necessary during the year. The outfall might be improved if the land available were set out and used for the final treatment of the effluent. The sewers have been extended into Chilton Parish and an extension has been made in Waldingfield Road where new houses are being built.

There are 34 closets on the conservancy system remaining at the end of 1924. These are all outside the thickly populated area and are under rural conditions.

The number of closets of the water carriage type at the end of the year was 1,790.

SCAVENGING.

The scavenging of the Borough has been improved, but there will be greater efficiency when all the houses have been provided with sanitary dust-bins.

The refuse is of a very mixed nature and requires in some cases, the assistance of slack coal to consume it in the destructor. The rapid adoption of gas cookers and fires has greatly reduced the bulk of cinders in the refuse which had formerly assisted combustion.

Sanitary Inspection of the Area.

SANITARY INSPECTION OF THE AREA UNDER ARTICLE 19 OF THE SANITARY OFFICERS ORDER, 1922.

This has been carried out with good results. The special inspections to deal with specific nuisances so that their abatement upon systematic lines may be attained is and will raise the general sanitary condition of the Borough.

Much remains to be done and progress can only be moderate as the owners of property on the whole are not in receipt of rents that permit a large expenditure upon improvements. A special feature of the year's work has been the re-construction and improvement of water closets, which is greatly needed.

Total Inspections made	...	...	...	980
Notices served—				
Statutory	...	...	...	31
Informal	...	...	...	150
Results—				
Water-closets re-constructed and improved	...			110
Re-constructed Drainage	...	...	...	1
Structural Repairs, &c.	...	...	...	143

SMOKE ABATEMENT.

No action taken or necessary.

SCHOOLS.

The Sanitary conditions of the Schools of the town is fair, and there is an adequate water supply from the mains.

Housing.

I.—GENERAL HOUSING CONDITIONS.

(1) There is a decided shortage of houses, and several houses require closing if accommodation could be found.

(2) No measures have been taken during the year to overcome the shortage except the encouragement of building by private enterprise.

(3) No important changes in population has taken place. The population is gradually falling.

II.—OVERCROWDING.

There is no great amount of overcrowding if one takes the common lodging-house standard of air space available.

The causes of the overfilling of houses is the absence of suitable houses in which the young married people can live, and they, therefore, live with the parents of one of them, and thus we get two families in a house intended for one.

No particular measures to deal with overcrowding are under consideration.

FITNESS OF HOUSES.

(1) In the older parts of the town the standard of houses is poor, brick floors below the level of the surrounding land, and lath and plaster walls being common. The commonest defects found are damp floors and walls, faulty roofs and faulty guttering leading to general dampness.

(2) The faults are mostly the result of the age of the buildings and the lack of repair in its early stages. The owners of the cottage property do not carry out the necessary repairs, and in this they are very much at fault.

(3) The difficulty in remedying unfitness is always the fact that the rents are disproportionate to the cost of repairs.

(4) The closet accommodation in many houses in the borough is inadequate, 4 or more houses having to use one closet. This is, in my opinion, very detrimental to the health of the inmates, leading, as it does, to chronic constipation.

UNHEALTHY AREAS.

There are no definite unhealthy areas. There are a number of yards in the borough where the standard of houses is low and the air space around small.

BYE-LAWS RELATING TO HOUSES, TO HOUSES-LET-IN-LODGINGS AND TO TENTS, VANS, SHED, &c
No Bye-laws in force.

Housing Statistics for 1925.

Number of new houses erected during the year :—

(a) Total	...	...	...	...	...	...	...	3
(b) With State assistance under Housing Acts 1919 or 1923								
(i.) By Local Authority	...	...	...	...	...	...	...	0
(ii.) By other bodies or persons	...	...	...	...	...	...	...	2

I. INSPECTION.

(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	...	...	...	...	...	...	...	151
(2) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	...	...	...	...	0
(3) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	...	...	...	...	...	...	...	4
(4) Number of dwelling houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910...	...	...	...	...	...	...	...	30

II. REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICE,

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	2
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III. ACTION UNDER STATUTORY POWERS.

A. Proceedings under Section 28 of Housing, Town Planning Act, of 1919.

(1) Number of dwelling houses in respect of which notices were served requiring repairs	...	...	...	...	...	...	...	5
(2) Number of dwelling houses which were rendered fit :—								
(a) by Owners	...	...	...	...	...	...	...	5
(b) by Local Authority in default of Owners	...	...	...	...	...	...	...	0
(3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	...	...	...	...	...	...	...	0

B. Proceedings under Public Health Acts.

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied 181

(2) Number of dwelling houses in which defects were remedied :

(a) by Owners 176

(b) by Local Authority in default of Owners 0

C. Proceedings under Sections 17 and 18 of Housing and Town Planning Act, 1909.

(1) Number of representations made with a view to the making of closing orders 0

(2) Number of dwelling houses in respect of which closing orders were made 0

(3) Number of dwelling houses in respect of which closing orders were determined, the dwelling houses have been rendered fit 0

(4) Number of dwelling houses in respect of which demolition orders were made 0

(6) Number of dwelling houses demolished in pursuance of demolition orders 0

Staff engaged on housing work—The Sanitary Inspector only.

Inspection of Food.

MILK SUPPLY.

(a) The milk supply of the borough is adequate and on the whole pure.

The number of Registered Milk Purveyors is 23.

(b) The control of tuberculous cattle is in the hands of the County Council.

(c) No action was taken under the Milk (Special Designations) Order, 1923.

MEAT.

Inspection is made at the time of slaughter.

No arrangements are made for marking.

Condemned meat is removed to the Refuse Destructor.

There is no public slaughter-house.

The number of Private Slaughter-Houses are—

			In 1920.		In Jan., 1925.		In Dec., 1925.
Registered	...	...	10	...	10	...	11
Licensed	.....	...	—		1	...	1
			—		—		—
Total	...	...	10	...	11	...	12
			—		—		—

BREAD.

The Bakehouses in the town are well kept and there have been no need for action in any way connected with them.

Infectious Diseases.

(a) SCARLET FEVER.

The number of cases of this disease during the last five years, 1921 to 1925, were as follows :—

1921 18. 1922 0. 1923 0. 1924 1. 1925 16.

The large number in 1921 were divided into two epidemics. In one 9 cases occurred, 4 being in one family. The second were a number of sporadic cases, and no connection could be found.

The large number in 1925 was due to an undiagnosed case remaining in hospital and infecting a number of nurses and patients in the early part of the year, and a case which showed symptoms of Scarlet Fever after admission infected a number of cases at the end of the year.

This disease has become very difficult to diagnose. The cases have been slight and very atypical, cases with no rash and no sore throat have occurred and infected others. In one case a rise of temperature for 24 hours was the only sign.

(b) DIPHTHERIA.

The number of cases have been :—

1921	21.	1922	3.	1923	1.	1924	1.	1925	2.
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All these cases were sporadic. Five of the 12 in 1921 were in one family and infected by the first case. The origin of these cases could not be traced. Antitoxin is held by the Medical Officer of Health and is supplied to the medical men who ask for it. It is promptly used being usually given before the result of the swab is received.

No use has been made of the Schick Test or of artificial methods of immunisation.

(c) Diseases notifiable under the regulations of 7th January, 1919. Pneumonia, Malaria, Dysentery, French Fever have been notified in small numbers.

(d) The examination of Pathological and Bacteriological specimens is done under arrangements made by the County Council.

(d) There are no arrangements for the isolation of contacts. They are kept under observation by the Medical Officer of Health in their own homes.

NON-NOTIFIABLE INFECTIOUS DISEASES.

There was a very extensive epidemic of Measles in 1924 and another of Mumps in 1925. These epidemics spread rapidly owing to the indifference of parents towards these diseases.

The notifications of absentees from schools are sent to the County Medical Officer of Health and the Local Medical Officer of Health. They are sent promptly. The practice is to visit some of the cases and verify the diagnosis and advise the Masters.

INFLUENZA.

There has been an epidemic of this disease every year of varying severity.

The one at the beginning of 1925 was extremely widespread even more so than that of 1917-18, but the type was mild and duration of the disease short and complications few.

The deaths were :—

1921	0.	1922	0.	1923	3.	1924	3.	1925	2.
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CANCER.

The mortality of this disease is as follows :—

1921	10	1922	8.	1923	17.	1924	13.	1925	12.
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These figures may be compared with some interest with the mortality of all forms of Tuberculosis :—

1921	16.	1922	8.	1923	6.	1924	10.	1925	5.
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No special action has been taken by the Local Authority in the matter of this disease. The need for seeking advice early in all diseases and especially in any condition which may possibly be due to cancer cannot be too often emphasised.

It has been the practice to disinfect after deaths from cancer.

DISINFECTION.

This is done by the Sanitary Officer after all cases of notifiable infectious diseases and after cancer. A formalin spray and formalin vapour is used.

DISINFESTATIONS.

This is done when necessary in the Sudbury Union by arrangement with the Guardians.

Notifiable Diseases 1925.

NOTIFIABLE DISEASES, 1925.

Disease.	Total cases notified.	Cases admitted to Hospital.	Total Deaths
Scarlet	16	16	2
Diphtheria	2	2	—
Erysipelas	1	0	0

AGE INCIDENCE.

Disease. Under	1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	Over 65
Scarlet Fever	—	—	—	—	2	5	2	1	5	1	—	—
Diphtheria ...	—	—	—	—	—	1	—	—	1	—	—	—
Erysipelas ...	—	—	—	—	—	—	—	1	—	—	—	—

Tuberculosis.

TUBERCULOSIS.

Age Periods.				New Cases.				Deaths.			
				Pulmonary.		Non-Pulmon		Pulmonary.		Non-Pulm'ry.	
				M.	F.	M.	F.	M.	F.	M.	F.
Under one year	...	...	...	—	—	—	—	—	—	—	—
1—	...	...	...	—	—	—	—	—	—	—	—
5—	...	...	...	1	—	—	—	1	—	—	—
10—	...	...	...	—	—	1	—	—	—	—	—
15—	...	...	...	—	1	—	—	—	—	—	—
20—	...	...	...	1	1	—	—	—	2	—	—
25—	...	...	...	—	1	—	—	—	—	—	—
35—	...	...	...	1	—	—	—	1	—	—	—
45—	...	...	...	—	—	—	—	—	—	—	—
55—	...	...	...	—	—	—	—	1	—	—	—
65 and over	...	...	...	—	—	—	—	—	—	—	—
Total				3	3	1	0	3	2	0	0
				6		1		5		0	

Tuberculosis is notified promptly. There were no non-notified Tuberculous deaths.

PUBLIC HEALTH (PREVENTION OF TUBERCULOUS) REGULATIONS, 1925.

No action necessary under these regulations.

PUBLIC HEALTH ACT, 1925. SECTION 62.

No action necessary.

R. W. RIX, M.O.H.